BEST AVAILABLE COPY

	PATENT A	APPLICATIO Effect	RD		097	-61	120	7				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LE C	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS			19			1	RA	ΓE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	7,10.00
TOTAL CHARGEABLE CLAIMS			/9 mir	nus 20=	*: &		X\$	9=		OR	X\$18=	1
INDEPENDENT CLAIMS			minus 3 = * 6		• 6		X4)=)=		OR	X80=	- (************************************
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+13				3 3 5 5 5 T	
* If the difference in column 1 is less than zero, enter "0" in column 2										ÖR	+270=	
CLAIMS AS AMENDED - PART II								AL		OR	OTHER	THAN
(Column 1) (Column 2) (Column 3)								LL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE	No.	RATE	ADDI- TIONAL FEE
Ž Ž	Total	*	Minus	**		=	X\$	9= .	(A)	OR	X\$18=	
ME	Independent	•	Minus	***		=	X40)=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>			+270=	
							+13	OTAL		OR	TOŢAL	A feet of the second
	(Column 1) (Column 2) (Column 3)						ADDIT.	FEE	8 ***	OR	ADDIT. FEE	**************************************
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE	1	RATE	ADDI-7 TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AMEN	Independent	*	Minus	***		=	X40)=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPEN			PENDENT	CLAIM							
							+13	D= DTAL		OR	+270= TOTAL	
								FEE		OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ADDI			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID		PRESENT EXTRA	RA ⁻	ΓË	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
A ME	Independent	·	Minus	***		=	X40)=		OR	X80=	* 0
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>			+270=	·
	If the entry in colu	ımn 1 is less than t	he entry in col	umn 2, writ	e "0" in co	olumn 3.	+13	O= OTAL		OR	TOTAL	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number fou									propriate bo	OR	ADDIT. FEE	L

Application or Docket Number